Submit 1 Copy To Appropriate District	State of New M	lexico	Form C-103
Office <u>District I</u> – (575) 393-6161	Energy, Minerals and Nat	tural Resources	October 13, 2009
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATIO	30-015-02451 5. Indicate Type of Lease	
<u>District III</u> $-$ (505) 334-6178	nst St., / n testa, 144 65210		
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		STATE FEE 6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	$\frac{District 1V}{1220 \text{ S. St. Francis Dr., Santa Fe, NM}}$		
87505			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			7. Lease Name or Unit Agreement Name Saladar
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 1
2. Name of Operator			9. OGRID Number
Jim Pierce			99439
3. Address of Operator			10. Pool name or Wildcat
200 First St, Suite 859, Roswell, NM 88203			Saladar Yates
4. Well Location			
Unit Letter L :_2130	feet from the _S	line and	990 feet from the W line
Section 33	Township 20 Range 28	NMPM	County Eddy
	Elevation (Show whether Di 3 GR	R, RKB, RT, GR, etc	
TEMPORARILY ABANDON CH. PULL OR ALTER CASING MU DOWNHOLE COMMINGLE MU OTHER: 0 13. Describe proposed or completed of starting any proposed work). Sproposed completion or recompleted 1. Spot 25 sx cmt @ 720' (Estin 2. Tag plug @ 610' or higher. 3. Spot 70 sx cmt @ tag to surfational contents	JG AND ABANDON ANGE PLANS INTERPLE COMPL INTERPLE COMPL INTERPLE COMPL INTERPLETE AND A COMPLIANT AND A COMPARENT AND A COMPAR	REMEDIAL WOR COMMENCE DF CASING/CEMEN OTHER: pertinent details, an	RILLING OPNS. P AND A
4. Cut off wellhead, install dry		•	ARTESIA DISTRICT
		nied"	DEC 122016
	-	nieu	
	"UG		RECEIVED
Spud Date:	Rig Release	Date:	
I hereby certify that the information above	is true and complete to the l	best of my knowled	ge and belief.
SIGNATURE Ban mits	TITLE A	get	DATE 12-8-16
Type or print name Ben Moritquer For State Use Only	E-mail addres	ss:BenmeBcman	DATE 12-8-16 dassociates.comphone: 432.580.716
	ITLE		DATE
Denied: Not Operator of Record			

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